

ARIZONA STATE DEPARTMENT OF HEALTH
BUREAU OF VITAL STATISTICS
CERTIFICATE OF BIRTH

BIRTH NO. 102-

PLACE OF BIRTH		A. COUNTY GRAHAM		B. CITY OR TOWN GRAHAM		REGISTRAR'S NO. (IF OUTSIDE CORPORATE LIMITS WRITE RURAL)	
CHILD'S NAME (TYPE OR PRINT)		A. (FIRST) EUNICE		B. (MIDDLE) LEOLA		C. (LAST) TALLEY	
SEX MALE	4A. THIS BIRTH SINGLE <input type="checkbox"/> TWIN <input checked="" type="checkbox"/> TRIPLET <input type="checkbox"/>		4B. IF TWIN OR TRIPLET (THIS CHILD) 1ST <input type="checkbox"/> 2ND <input type="checkbox"/> 3RD <input type="checkbox"/>		5A. DATE OF BIRTH (MONTH) (DAY) (YEAR) OCTOBER 26 1908		5B. HOUR M
FATHER OF CHILD							
FATHER'S NAME		A. (FIRST) THOMAS		B. (MIDDLE) HUGH		C. (LAST) TALLEY	
BIRTHPLACE (STATE OR FOREIGN COUNTRY) ARIZONA		10A. USUAL OCCUPATION FARMER		7. COLOR OR RACE WHITE		8. AGE (AT TIME OF THIS BIRTH) 20	
				10B. KIND OF BUSINESS OR INDUSTRY FARMING			
MOTHER OF CHILD							
MOTHER'S FULL MAIDEN NAME		A. (FIRST) SARAH		B. (MIDDLE) ISABELLE		C. (LAST) NORTON	
BIRTHPLACE (STATE OR FOREIGN COUNTRY) ARIZONA		15A. USUAL OCCUPATION HOUSEWIFE		12. COLOR OR RACE WHITE		13. AGE (AT TIME OF THIS BIRTH) 18	
				15B. KIND OF BUSINESS OR INDUSTRY			
INFORMANT'S SIGNATURE							
ATTENDANT'S SIGNATURE W.E. PLATT, M.D.				17B. ADDRESS GRAHAM, ARIZONA			
DATE RECEIVED BY LOCAL REGISTRAR				18B. LOCAL REGISTRAR'S SIGNATURE W.E. PLATT, M.D.			

STATE REGISTRAR'S CERTIFICATION

This is to certify that the above was correctly copied from the original birth record on file with the Arizona State Department of Health.

5-21-1971

State Registrar LOUIS C. KOSSUTH, M.D.

By *Salinda King*
Ass't. State Registrar

MAKE NO ENTRY HERE

Abstract of old county record, filed in Bureau of Vital Statistics in 1935